PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10804456

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20					RATE	FEE	٦ ·	RATE	FEE	
FC	DR .	_	NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	OTAL CHARGE	ABLE CLAIMS	20 minus 20=		• .			X\$ 9=		OR	X\$18=		
INI	DEPENDENT C	LAIMS	2 minus 3 =		•			X43=		OR	X86=		
Μl	JLTIPLE DEPEI	NDENT CLAIM P	RESENT	·				+145=		OR	+290=	-	
* 11	the difference	in column 1 is	less than ze	s than zero, enter "0" in column			i	TOTAL	381	OR	TOTAL		
	CLAIMS AS AMENDED - PART II								بداع		OTHER	THAN	
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	endent + Minus +++ T PRESENTATION OF MULTIPLE DEPENDENT			CL AINA	=		X43=		OR	X86=		
	FIRST PRESE		JETIPLE DEF	- ENDENT	CLANVI		' [+145=		OR	+290=	\ .	
							L	TOTAL		OR	· TOTAL		
		Α	VDDIT. FEE		. ,	ADDIT. FEE	15						
~	· -	(Column 1) CLAIMS		(Colum	ST	(Column 3)	Г	1	ADDI-	- [ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT		RATE	TIONAL		RATE	TIONAL	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							- 1				74	
								+145=	·	OR	+290=		
		•	A	TOTAL DDIT, FEE		OR ,	TOTAL ODIT. FEE	i i					
		(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	100		
	the enter in enter	. L	+145=		OR	+290=							
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT, FEE	·	
. 1	i the inighest Num	mber Previously Paid ber Previously Paid	io For (Total or	o SPACE is Independe	ress than nt) is the	i 3, enter "3." highest number		ODIT. FEE L	opriate box				